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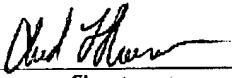
Applicant(s): Hyun-Jae Kim, et al.

Docket No.  
YOM-0060Application No.  
10/663,081Filing Date  
9-16-2003Examiner  
NYAGroup Art Unit  
2812**Invention: MASK FOR POLYCRYSTALLIZATION AND METHOD OF MANUFACTURING THIN FILM  
TRANSISTOR USING POLYCRYSTALLIZATION MASK**I hereby certify that this Amendment Transmittal Letter (1 page) and Response to Restriction Requirement (2 pages)  
(Identify type of correspondence)

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on September 27, 2004  
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>YOM-0060</b>	
Applicant(s): <b>Hyun-Jae KIM, et al.</b>					
Application No. <b>10/663,081</b>	Filing Date <b>9-16-2003</b>	Examiner <b>Isaac, Stunetta D.</b>	Customer No. <b>23413</b>	Group Art Unit <b>2812</b>	Confirmation No. <b>1689</b>
<b>Invention: MASK FOR POLYCRYSTALLIZATION AND METHOD OF MANUFACTURING THIN FILM TRANSISTOR USING POLYCRYSTALLIZATION MASK</b>					
<b>COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b> <input type="text" value="\$0.00"/>					
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. <input type="text" value=""/> in the amount of <input type="text" value=""/></p> <p><input type="checkbox"/> A check in the amount of <input type="text" value=""/> to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <input type="text" value="06-1130"/></p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p>					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 <i>Chad L. Thorson</i> <i>Signature</i>					
Dated: September 27, 2004					
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <input type="text"/> <i>(Date)</i>					
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CC:					